

How to Invest - CORPORATE INVESTOR

To invest in the Gyrostat Capital Stability Fund (Fund) you will need to complete and sign the attached Application Form.

- Supply of a Tax File Number (TFN) is discretionary. It is not an offence if you decide not to supply your TFN. If you do not supply your TFN, however, tax will be deducted from your income earned at the highest marginal tax rate (plus Medicare levy) and forwarded to the Australian Taxation Office. These deductions will appear on your statements. A form is attached for your convenience.
- Joint applications must be signed by all applicants. Joint investments will be deemed to be held as Joint Tenants.
- Applications under Power of Attorney must be accompanied by a certified copy or the original of the Power of Attorney with specimen signatures.

The minimum initial investment in the Fund is \$50,000. The trustee of the Fund, Gyrostat Capital Management Pty Ltd (ACN 138 219 002) AFSL 452917 (Gyrostat, Trustee, We or Us) may vary the minimum investment amount from time to time.

An investment in the Fund is only open to wholesale clients for the purposes of the Corporations Act.

An investor is a wholesale client for the purposes of the Corporations Act, where any one of the following applies:

- the investor's investment is \$500,000 or more;
- the investor provides an accountant's certificate stating that the investor has net assets of at least \$2.5 million or has gross income of at least \$250,000 in each of the last two financial years;
- the investor is a "professional investor" (including those that hold an Australian Financial Services Licence (AFSL), are APRA regulated or have at least \$10 million worth of assets); or
- Gyrostat is satisfied on reasonable grounds that the investor has suitable previous experience in financial products, subject to certain conditions.

Please refer to the Application Form for the type of written evidence that we will require to accept your investment as a wholesale client.

Completed application forms should be sent to:

Gyrostat Capital Management Pty Ltd

Address PO Box 7136, Melbourne 3004
Telephone 03 9041 0970
Fax 03 9041 0971
Email Address applications@gyrostat.com.au

You may pay your application money by electronic transfer or cheque to:

Account Name One Managed Investment Funds Limited ACF Gyrostat Capital Stability Fund Subscriptions Account
Bank St George
BSB 332-127
Account number 554 334 328

This Application Form is for Corporate Non-Trustee Investors only - if you are investing in the name of an individual or if you are investing in the name of a Company acting as a Trustee of a Trust, please contact our office for the relevant Application Form or download the appropriate form at www.gyrostat.com.au

Examples of correct names and required signatures

TYPE OF INVESTOR	CORRECT NAME	INCORRECT NAME	SIGNATURE REQUIRED
Company • use full company title, do not use abbreviations	ABC Pty Ltd XYZ Limited	ABC P/L, ABC Co, XYZ Inc.	• by two directors, or • by a director and a secretary, or • if there is only one director by that sole director

PLEASE CERTIFY WHETHER OR NOT THE APPLICANT, OR A BENEFICIAL OWNER OF THE APPLICANT IS A POLITICALLY EXPOSED PERSON (PEP).

A PEP is an individual that holds a prominent public position or function in a government body or international organisation or is an immediate family member or close associate of a PEP. A PEP is not disqualified from investing but we are required to collect additional information as part of the application process. Please certify that the applicant is a PEP if they, or a beneficial owner of the applicant:

- **Hold a prominent public position or function in a government body or an international organisation including:**
 - o Head of State or head of a country or government or are a Senior Government official;
 - o Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a Court of equivalent seniority in a foreign country or international organisation;
 - o Senior foreign representative, ambassador, or high commissioner;
 - o High-ranking member of the armed forces;
 - o Board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation;
- **Have an immediate family member or a close associate that is a person referred to in the first bullet point including:**
 - o A spouse or de facto partner;
 - o A child or child's spouse or de factor partner;
 - o A parent; or
 - o Any individual who is known (having regard to public or readily available information) to have Joint Beneficial Ownership of a legal entity or legal arrangement with a peron referred to in the first bullet point, or Sole Beneficial Ownership of a legal entity or legal arrangement that is known to exist for the benefit of a person described in the first bullet point

The applicant is NOT a PEP

The applicant is a PEP

Application Form

This application form relates to the Information Memorandum dated 18 August 2015 (IM) issued by Gyrostat Capital Management Pty Ltd (ACN 138 219 002) AFSL 452917. Please read the IM in full before completing this Application Form. Unless otherwise specified, terms defined in the IM have the same meaning in this Application Form.

PLEASE COMPLETE IN BLOCK LETTERS

Part A – Investor & Investment Details

Please provide the Corporate Investor and preferred Contact Person

COMPANY NAME

Contact Person

ACN OR ABN

Registered Office Address (PO Box is NOT acceptable)

STREET

SUBURB STATE POSTCODE COUNTRY

TELEPHONE FACSIMILE EMAIL

Postal Address (if different from above)

Investment Details

\$ AMOUNT (\$AUD) Please note the minimum initial investment amount is \$50,000.00.

Payment Details

Please tick the box to advise how your payment will be made:

Cheque – Please make payable to **One Managed Investment Funds Limited ACF Gyrostat Capital Stability Fund Subscriptions Account**

Electronic Funds Transfer (EFT) to

Account Name	One Managed Investment Funds Limited ACF Gyrostat Capital Stability Fund Subscriptions Account
Bank	St George
BSB	332-127
Account Number	554 334 328

Taxation Details

Is the Company a resident of Australia for taxation purposes? (Select one of the following options)

Yes - please complete the below No – please provide country of residence: _____

Tax File Number (TFN) _____ Exemption Number: _____

Distributions and withdrawal proceeds

Your distribution preference

Distributions can either be reinvested in the fund or paid to you via EFT. Please indicate your preference.

Reinvest in the Fund; OR Paid out via EFT

Irrespective of your distribution preference, please fill in your bank details below.

Your distribution preference

By completing this section you confirm that any distributions and withdrawal proceeds sent by EFT to a designated bank account are sent at your risk insofar as the onus to provide bank account details rests solely on you.

Please pay distributions and withdrawal proceeds to the following bank account:

ACCOUNT NAME	BRANCH NAME	
BSB	ACCOUNT NUMBER	BANK

Part B – Investor Identification Details (Identification form for Companies)

1.1 Regulatory/Listing Details - if applicable

(select X of the following categories if they apply to the Company and provide the information requested)

Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)

REGULATOR NAME

LICENCE NUMBER

Listed Company NAME OF MARKET/EXCHANGE

Majority-owned subsidiary of an Australian Listed Company

AUSTRALIAN LISTED COMPANY NAME

NAME OF MARKET/EXCHANGE

If you are a listed domestic company or foreign public company GO TO SECTION C SIGNATURE AND DECLARATION BELOW.

Foreign companies will be required to provide additional information.

All other types of companies GO TO SECTION 1.2 AND 1.3 BELOW

1.2 Directors

how many directors are there?

Provide full name of each director below

FULL GIVEN NAME(S)	SURNAME
FULL GIVEN NAME(S)	SURNAME
FULL GIVEN NAME(S)	SURNAME
FULL GIVEN NAME(S)	SURNAME

If there are more directors, provide details on a separate sheet of paper and attach it to your application form.

1.3 Shareholders

Provide details of ALL individuals who are beneficial owners through one or more shareholdings of more than 25% of the company's issued capital.

Shareholder 1

FULL GIVEN NAME(S)	SURNAME
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Address details (PO Box is NOT acceptable)

STREET			
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SUBURB	STATE	POSTCODE	COUNTRY
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Shareholder 2

FULL GIVEN NAME(S)	SURNAME
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Address details (PO Box is NOT acceptable)

STREET			
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SUBURB	STATE	POSTCODE	COUNTRY
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Shareholder 3

FULL GIVEN NAME(S)	SURNAME
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Address details (PO Box is NOT acceptable)

STREET			
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SUBURB	STATE	POSTCODE	COUNTRY
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Shareholder 4

FULL GIVEN NAME(S)	SURNAME
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Address details (PO Box is NOT acceptable)

STREET			
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SUBURB	STATE	POSTCODE	COUNTRY
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FULL GIVEN NAME(S)	SURNAME
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Address details (PO Box is NOT acceptable)

STREET			
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SUBURB	STATE	POSTCODE	COUNTRY
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Section B.2 – Record of Verification Procedure (Office Use Only)

Part I – Australian Companies

Gyrostat must verify the following information from a search of the ASIC Register.

	Full name of company as registered by ASIC
	Whether the company is registered as a proprietary or public company
	ACN issued to company

Part I – Foreign Companies

Gyrostat must verify the following information from the certificate or extract of registration provided by the company

Registered foreign companies	
	the full name of the company as registered by ASIC;
	whether the company is registered by the relevant foreign registration body and if so whether it is registered as a private or public company
	the ARBN issued to the company
Unregistered foreign companies	
	the full name of the company
	whether the company is registered by the relevant foreign registration body and if so: <ul style="list-style-type: none"> any identification number issued to the company by the relevant foreign registration body upon the company's formation, incorporation or registration; and whether the company is registered as a private or public company.

Part C – Declaration And Signature

Privacy Collection Notice

The Trustee will collect personal information relating to you in its capacity as trustee of the Fund. Such information may be disclosed by the Trustee to the Manager or may be collected directly from you by the Manager.

To assist the Manager to act as the investment manager of the Fund, personal information relating to you may also be disclosed by the Manager to the Trustee (or vice versa) or by any party that acts as the administrator of the Fund from time to time.

The Manager collects personal information to assist it to act as the investment manager of the Fund.

The Trustee collects personal information so that it can process and administer your application for investment in the Fund, manage and administer any investment you subsequently make in the Fund and otherwise perform its duties as trustee of the Fund.

If you do not provide the personal information requested in this Application Form or provide incomplete or inaccurate information, the Trustee may not be able to accept or process your application for investment in the Fund or may be limited in the services the Manager and/or the Trustee can provide with respect to the administration of any investment you subsequently make in the Fund.

The Manager privacy policy sets out details of how the Manager will collect, store, manage, use and disclose personal information it collects from you. The Manager privacy policy is available at www.gyrostat.com.au/governance.

The Trustee privacy policy sets out details of how the Trustee will collect, store, manage, use and disclose personal information it collects from you. The Trustee privacy policy is available at www.gyrostat.com.au/governance.

The Manager privacy policy and the Trustee privacy policy also contain information about how you can access and seek correction of the personal information held by the Manager and the Trustee (as applicable), how you can complain to the Manager or the Trustee (as applicable) about a breach of the Privacy Act or any registered code under the Privacy Act that binds the Manager or the Trustee and how the Manager or the Trustee (as applicable) will respond to and deal with such a complaint.

The Manager or the Trustee may be required or authorised by law to collect certain personal information from you and/or disclose your personal information. For example, the Manager and the Trustee are required to collect and disclose certain information in order to comply with the identification and verification requirements imposed under the Anti-Money Laundering and Counter Terrorism Financing Act.

The Manager will disclose your personal information to the Trustee or any other party that acts as the trustee of the Fund from time to time.

The Trustee will disclose your personal information to any other party appointed to act as administrator of the Fund from time to time. The Trustee may also disclose your personal information organisations involved in providing services to the Trustee, including registry or identity verification service providers.

By signing and/or submitting this Application Form to the Manager, you consent to all such disclosures by the Manager or the Trustee.

Some of the recipients to whom the Manager or the Trustee discloses your personal information may be based overseas.

For queries or information regarding privacy matters please contact:

Gyrostat Capital Management Pty Ltd ACN 138 219 002

Privacy Officer Shelley Racine
By telephone 9041 0970
By letter Suite 402, 566 St Kilda Road or PO Box 7136 Melbourne, VIC, 3004
Melbourne, VIC, 3004
By email shelley.racine@gyrostat.com.au

Declaration

I/we declare and agree that:

- All details in this application are true and correct;
- I/we have received and have read, or have had the opportunity to read, the Information Memorandum for the Fund (IM);
- I/we have read the Privacy Collection Notice and agree to be bound by the terms of that notice;
- I/we am/are an individual over 18 years of age, or I am a duly incorporated body;
- If this application is signed under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this application);
- If signing on behalf of a company as a sole signatory, that I am signing as a sole director and sole secretary of the company; and
- If investing as trustee, on behalf of a superannuation fund or trust, that I/we am/are acting in accordance with my/our designated powers and authority under the applicable trust deed. In the case of a superannuation fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Superannuation) Act 1993.

I/we acknowledge that:

- Neither the Trustee, Manager, their related bodies corporate or associates nor any other person guarantees the repayment of capital or the performance of the Fund or any particular rate of return from the Fund;
- Unit holdings are subject to investment risks, including loss of income and principal invested and possible delays in repayment;
- The Trustee is authorised to apply the TFN or ABN provided and it will be applied to all future applications for Units, unless I/we advise the Trustee otherwise;
- The Trustee in consultation with the Manager reserves the right to not accept any application in its absolute discretion;
- If my/our application is incomplete or monies are dishonoured, the Trustee will not process my/our application and will notify me/us.
- I acknowledge that a completed application comprises a valid Application Form, Investor Identification Documentation and cleared Funds in the Trustee's Bank Account; and
- I/we have read the information on privacy and personal information contained in the IM and consent to my/our personal information being used and disclosed as set out in the IM and in accordance with the Trustee's privacy policy including for, or in relation to, the subscription for Units.

I/we warrant that:

- I/we will comply and will continue to comply with applicable anti-money laundering and counter-terrorism financing laws and regulations, including but not limited to the law and regulations of Australia in force from time to time (AML/CTF Law);
- I/we am/are not aware and have no reason to suspect that the moneys used to fund my/our investment have been or will be derived from or related to any money laundering, terrorism financing or similar activities illegal under applicable laws or regulations ('illegal activity');
- or that the proceeds of my/our investment in a Fund will be used to finance any illegal activities;
- I/we will provide the Manager and Trustee with all additional information and assistance they may request in order for them to comply with any AML/CTF Law; and
- I/we am/are not a 'politically exposed' person or organisation for the purposes of any AML/CTF Law

Account operating instructions (if no selection is made, all individuals to sign will be assumed)

Any individual to sign

Any two individuals to sign

All individuals to sign

Other (please specify):

SIGNATURE	NAME AND TITLE (BLOCK LETTERS PLEASE)	PHONE	DATE
SIGNATURE	NAME AND TITLE (BLOCK LETTERS PLEASE)	PHONE	DATE
SIGNATURE	NAME AND TITLE (BLOCK LETTERS PLEASE)	PHONE	DATE
SIGNATURE	NAME AND TITLE (BLOCK LETTERS PLEASE)	PHONE	DATE

INVESTOR APPROVAL (Office Use Only)

Please ensure that all items on this checklist have been complete prior to approving the investor:

	The investor has completed the Application Form in full.
	All relevant AML/CTF identification information and verification information has been collected from the investor.
	The Application Form has been signed and dated.
	The Application Money has been received.

DATE APPLICATION APPROVED (DD/MM/YYYY)

STAFF NAME

SIGNATURE

INVESTOR ID NUMBER ASSIGNED TO INVESTOR